



# NTSB ACADEMY

## COURSE APPLICATION

Course Title : \_\_\_\_\_

Course ID Code: \_\_\_\_\_ Course Dates: \_\_\_\_\_ Tuition: \$ \_\_\_\_\_

Keys (For NTSB Academy Use Only) \_\_\_\_\_

Applications without payment will not be processed. Deadline for registration and cancellation with refund is 7 business days prior to start of course. **If you do not receive a registration confirmation notice within 10 business days of faxing this application or within 15 business days of mailing it, please contact registrar@ntsb.gov.**

**Applicant Information\*** Submit a separate application for each course and for each student.

Applicant's Name (Last, First, Middle) \_\_\_\_\_ I am a returning NTSB student: Yes or No

Title/Function \_\_\_\_\_

Organization \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

Please print name exactly as it should appear on training certificate: \_\_\_\_\_

**Method of Payment** Please check one method below. (NTSB cannot accept cash)

AMEX VISA MC Account # \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Is this a Federal government issued credit card? Yes No

Check or Money Order. Make check payable to NTSB in U.S. dollars and submit with application by mail.

IPAC (Intra-governmental Payment and Collection - U.S. federal employee use only. Please attach training request form). Complete the following:

Agency Contact & Phone: \_\_\_\_\_

Agency Location Code (ALC): \_\_\_\_\_ Amount of Bill: \$ \_\_\_\_\_

**Contact Information** Send completed application and payment by one of the following methods:

Fax: 571-223-3904

Mail: Registrar, NTSB Academy  
45065 Riverside Parkway  
Ashburn, VA 20147

\* Students with special needs are requested to call 571-223-3901 as soon as possible to arrange necessary accommodations.